Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
MIDDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE DIVISION	<u> </u>	
Case number (if known)	Chapter you are filing under:	
	■ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	☐ Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself						
		About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):			
1.	Your full name						
	Write the name that is on your government-issued picture identification (for	Jonathan First name	-	First name			
	example, your driver's license or passport).	Middle name		Middle name			
	Bring your picture identification to your meeting with the trustee.	Deichler Last name and Suffix (Sr., Jr., II, III)	_	Last name and Suffix (Sr., Jr., II, III)			
2.	All other names you have used in the last 8 years						
	Include your married or maiden names.						
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-3989					

De	btor 1 Deichler, Jonatha	n M.	Case number (if known)		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):		
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	☐ I have not used any business name or EINs.		
	Include trade names and doing business as names	Business name(s)	Business name(s)		
		EINs	EINs		
5. V	Where you live		If Debtor 2 lives at a different address:		
		574 Rutter Ave Kingston, PA 18704-4719 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code		
		Luzerne County	County		
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.		
		104 Copper Mountain Dr Tafton, PA 18464-9607 Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code		

Why you are choosing this district to file for bankruptcy

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

Check one:

- Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
- I have another reason. Explain. (See 28 U.S.C. § 1408.)

Deb	otor 1	Deichler, Jonatha	n M.				Case number (if known)	
Par	t 2: T	ell the Court About Y	our Bankr	uptcy Ca	se			
7.	Bankr	napter of the uptcy Code you are			rief description of each, see <i>Noti</i> he top of page 1 and check the a		y 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Fo	m
	cnoos	ing to file under	■ Chapt	ter 7				
			☐ Chapt	ter 11				
			☐ Chapt	ter 12				
			☐ Chapt	ter 13				
8.	How y	ou will pay the fee	■ I w	ill pay the	entire fee when I file my petiti	on. Please che	eck with the clerk's office in your local court for more details	
			If y		ey is submitting your payment on		ourself, you may pay with cash, cashier's check, or money ord our attorney may pay with a credit card or check with a	ier.
			☐ Ine	ed to pay	the fee in installments. If you		otion, sign and attach the Application for Individuals to Pay Th	е
				•	Installments (Official Form 103A)		ion only if you are filing for Chapter 7. By law, a judge may, bu	ıt is
			not	required to	o, waive your fee, and may do so	only if your inc	come is less than 150% of the official poverty line that applies	to
					ze and you are unable to pay the Chapter 7 Filing Fee Waived (Offi		ents). If you choose this option, you must fill out the <i>Applicatic</i> B) and file it with your petition.	n
					, -			
9.		ou filed for uptcy within the last	■ No.					
	8 year		☐ Yes.					
				District		When	Case number	
				District		When	Case number	
				District		When	Case number	
10.		y bankruptcy cases	■ No					
	a spou	ng or being filed by use who is not filing use with you, or by ness partner, or by	☐ Yes.					
	an am	nate?		Debtor			Relationship to you	
				District		When	Case number, if known	
				Debtor				
				District		When	Case number, if known	
11	Do you	ı rent your		Go to I	ine 12.			—
• • •	reside		■ No.					
			☐ Yes.		our landlord obtained an eviction	judgment aga	ainst you?	
					No. Go to line 12.		and the state of t	
					Yes. Fill out <i>Initial Statement Ab</i> bankruptcy petition.	out an Evictioi	in Judgment Against You (Form 101A) and file it as part of thi	5

Debtor 1 Deichler, Jo	onathan M.			Case number (if known)
Part 3: Report About	Any Businesses	You Own	as a Sole Proprieto	r
12. Are you a sole prop of any full- or part-t business?		Go to	Part 4.	
	☐ Yes.	Name	and location of busi	ness
A sole proprietorship business you operate individual, and is not separate legal entity s a corporation, partner or LLC.	e as an ta such as		e of business, if any	
If you have more than sole proprietorship, u separate sheet and a	ise a	Numb	per, Street, City, State	e & ZIP Code
to this petition.	illacii il	Chec	k the appropriate box	to describe your business:
			Health Care Busine	ess (as defined in 11 U.S.C. § 101(27A))
			Single Asset Real I	Estate (as defined in 11 U.S.C. § 101(51B))
			Stockbroker (as de	fined in 11 U.S.C. § 101(53A))
			Commodity Broker	(as defined in 11 U.S.C. § 101(6))
			None of the above	
13. Are you filing unde Chapter 11 of the Bankruptcy Code a you a small busines debtor?	deadlines and are operation	If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set and deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, state operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the product 116(1)(B).		
For a definition of sm	■ No.	I am r	not filing under Chap	ter 11.
business debtor, see U.S.C. § 101(51D).		I am f Code	-	11, but I am NOT a small business debtor according to the definition in the Bankruptcy
	☐ Yes.	I am f	iling under Chapter 1	11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Part 4: Report if You	Own or Have Anv	Hazardo	us Property or Any	Property That Needs Immediate Attention
14. Do you own or have			. , ,	• •
property that poses alleged to pose a th imminent and ident	s or is Yes.	What is	the hazard?	
hazard to public he safety? Or do you o any property that n immediate attentior	own eeds		liate attention is why is it needed?	
For example, do you perishable goods, or livestock that must b or a building that nee urgent repairs?	e fed,	Where is	s the property?	
				Number, Street, City, State & Zip Code

Debtor 1 Deichler, Jonathan M.

Case number (if known)

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court. About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

□ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Debtor 1 Deichler, Jonathan M.				Case number (if known)			
ar	t 6: Answer These Question	ons for Rep	orting Purposes				
16.	What kind of debts do you have?		Are your debts primarily consum individual primarily for a personal, fa		d in 11 U.S.C.§ 101(8) as "incurred by an		
			☐ No. Go to line 16b.				
			Yes. Go to line 17.				
				ss debts? Business debts are debts that ugh the operation of the business or investigation.			
			☐ No. Go to line 16c.				
			☐ Yes. Go to line 17.				
		16c.	State the type of debts you owe that	are not consumer debts or business de	bts		
17.	Are you filing under Chapter 7?	□ No.	l am not filing under Chapter 7. Go	to line 18.			
	Do you estimate that after any exempt property is excluded and		I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?				
	administrative expenses are paid that funds will be		No				
	available for distribution to unsecured creditors?		☐ Yes				
18.	How many Creditors do	1 -49		1 ,000-5,000	□ 25,001-50,000		
	you estimate that you owe?	□ 50-99		☐ 5001-10,000	☐ 50,001-100,000		
		☐ 100-199 ☐ 200-999		□ 10,001-25,000	☐ More than100,000		
19.	How much do you	■ \$0 - \$50	0.000	□ \$1,000,001 - \$10 million	☐ \$500,000,001 - \$1 billion		
	estimate your assets to be worth?	□ \$50,00°	1 - \$100,000	□ \$10,000,001 - \$50 million	□ \$1,000,000,001 - \$10 billion		
			01 - \$500,000 01 - \$1 million	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
		\$500,00	J1 - \$1 million	—	I wore than too billion		
20.	How much do you	\$0 - \$50	0,000	□ \$1,000,001 - \$10 million	□ \$500,000,001 - \$1 billion		
	estimate your liabilities to be?		1 - \$100,000	□ \$10,000,001 - \$50 million	\$1,000,000,001 - \$10 billion		
		, ,	01 - \$500,000	□ \$50,000,001 - \$100 million □ \$100,000,001 - \$500 million	☐ \$10,000,000,001 - \$50 billion☐ More than \$50 billion		
		\$500,00	O1 - \$1 million	— \$100,000,001 \$000 Hillion	— more than too sime.		
ar	7: Sign Below						
or	you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.					
		If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
		If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
		I request re	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
		case can re			perty by fraud in connection with a bankruptcy 3 U.S.C. §§ 152, 1341, 1519, and 3571.		
		Jonathai	n M. Deichler of Debtor 1	Signature of Debtor 2	2		
		Executed of	November 26, 2019 MM / DD / YYYY	Executed on MM /	DD / YYYY		

Debtor 1 Deichler, Jonatha	an M.	Cas	ee number (if known)
For your attorney, if you are represented by one	Chapter 7, 11, 12, or 13 of title 11, United States person is eligible. I also certify that I have delive	Code, and have explained red to the debtor(s) the noti	ormed the debtor(s) about eligibility to proceed under the relief available under each chapter for which the ce required by 11 U.S.C. § 342(b) and, in a case in ry that the information in the schedules filed with the
an attorney, you do not need to file this page.	petition is incorrect.	Data	N I 00 0040
	/s/ David Harris Signature of Attorney for Debtor	Date	November 26, 2019 MM / DD / YYYY
	David Harris Printed name		
	Law Office of David J. Harris Firm name		
	67-69 Public Sq Ste 700 Wilkes Barre, PA 18701-2515 Number, Street, City, State & ZIP Code		
	Contact phone (570) 823-9400 48558 (PA)	Email address	dh@lawofficeofdavidharris.com
	Bar number & State		

Certificate Number: 17572-PAM-CC-033672571



CERTIFICATE OF COUNSELING

I CERTIFY that on November 8, 2019, at 5:13 o'clock PM PST, Jonathan Deichler received from Dollar Learning Foundation, Inc., an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the Middle District of Pennsylvania, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date:	November 8, 2019	By:	/s/Kristina Milicevic
		Name:	Kristina Milicevic
		Title	Councilor

* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

	Fill in this information to identify yo	ur case:			
Del	otor 1 Jonathan M. Deichler				
D-1	First Name	Middle Name	Last Name		
	otor 2 use if, filing) First Name	Middle Name	Last Name		
Uni		DDLE DISTRICT OF PE VISION	ENNSYLVANIA, WILKES-BARRE		
	se number				
(if kr	own)			_	cif this is an ded filing
Su Be a info you	s complete and accurate as possible. If t rmation. Fill out all of your schedules firs r original forms, you must fill out a new S	wo married people are st; then complete the ir	I Certain Statistical Information filing together, both are equally responsible for afformation on this form. If you are filing amended box at the top of this page.	supplying o	
Par	t 1: Summarize Your Assets				
				Your as Value o	ssets f what you own
1.	Schedule A/B: Property (Official Form 19 1a. Copy line 55, Total real estate, from S			\$	0.00
	1b. Copy line 62, Total personal property,	from Schedule A/B		\$	1,342.00
	1c. Copy line 63, Total of all property on S	Schedule A/B		\$	1,342.00
Par	t 2: Summarize Your Liabilities				
					abilities t you owe
2.	Schedule D: Creditors Who Have Claims 2a. Copy the total you listed in Column A		fficial Form 106D) ottom of the last page of Part 1 of <i>Schedule D</i>	\$	0.00
3.	Schedule E/F: Creditors Who Have Unsec 3a. Copy the total claims from Part 1 (pri		orm 106E/F) from line 6e 3 8chedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (no	npriority unsecured clair	ms) from line 6j s chedule E/F	\$	38,548.55
			Your total liabilities	\$	38,548.55
Dor	Summariza Vaur Income and Evre	nnaa			
Par	<u> </u>				
4.	Schedule I: Your Income(Official Form 10 Copy your combined monthly income from			\$	940.00
5.	Schedule J: Your Expenses (Official Form Copy your monthly expenses from line 22c			\$	316.00
Par	Answer These Questions for Admi	nistrative and Statistic	cal Records		
6.	Are you filing for bankruptcy under Ch. No. You have nothing to report on this	•	this box and submit this form to the court with your o	ther schedu	les.
7.	■ Yes What kind of debt do you have?				
	Your debts are primarily consume purpose." 11 U.S.C. § 101(8). Fill out		ts are those "incurred by an individual primarily for a plurposes. 28 U.S.C§ 159.	ersonal, fan	nily, or household
	Your debts are not primarily const court with your other schedules.	umer debts. You have n	oothing to report on this part of the form. Check this b	ox and subn	nit this form to the

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Official Form 106Sum

page 1 of 2

Summary of Your Assets and Liabilities and Certain Statistical Information

8. **From the** Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

\$_____1,286.62

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total claim	
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$0.C	00

Fill in th	nis information to iden	ntify your case and this fil	ing:	
Debtor 1	Jonathan M. De			
	First Name	Middle Name	Last Name	
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name	
		MIDDLE DISTRICT OF	PENNSYLVANIA, WILKES-BARRE	
United States Ba	ankruptcy Court for the:			
Case number				☐ Check if this is an
				amended filing
000 : 15	1004/5			
	orm 106A/B			
<u>Schedul</u>	<u>le A/B: Pro</u>	perty		12/15
			once. If an asset fits in more than one category, list the a jed people are filing together, both are equally responsible	
information. If mor	re space is needed, attac		rm. On the top of any additional pages, write your name a	
Answer every ques	stion.			
Part 1: Describe	Each Residence, Buildin	ng, Land, or Other Real Estat	te You Own or Have an Interest In	
1. Do you own or I	have any legal or equital	ble interest in any residence,	building, land, or similar property?	
■ No. Go to Par	rt 2			
Yes. Where i				
□ res. Where i	is the property:			
Part 2: Describe	Your Vehicles			
			hicles, whether they are registered or not? Include a e G: Executory Contracts and Unexpired Leases.	any vehicles you own that
3. Cars, vans, tr	ucks, tractors, sport u	utility vehicles, motorcycl	les	
■ No				
□ Yes				
4. Watercraft, ai	rcraft, motor homes, A	ATVs and other recreation	nal vehicles, other vehicles, and accessories	
Examples: Boa	ts, trailers, motors, pers	sonal watercraft, fishing vess	sels, snowmobiles, motorcycle accessories	
■ No				
☐ Yes				
			entries from Part 2, including any entries for pages	\$0.00
.,				
Part 3: Describe	Your Personal and Hou	usehold Items		
Do you own or l	have any legal or equi	itable interest in any of th	e following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	oods and furnishings ajor appliances, furniture	e, linens, china, kitchenware		
Yes. Desc	ribe			
	Furnitur	re		\$250.00
	Applian	cas and Kitchenware		\$100.00

Official Form 106A/B Schedule A/B: Property page 1

Debtor 1	Deichler,	Jonathan M.		Case number (if known)	
. Electro	nics				
Examp □ No		and radios; audio, video, cell phones, cameras, me		computers, printers, scanners; music collect	ctions; electronic devices
	. Describe				
_ 100.	. Dosonbe	Electronics			\$600.00
		nd figurines; paintings, pri s, memorabilia, collectible		ictures, or other art objects; stamp, coin, or	baseball card collections; other
_	. Describe				
Examp —	nent for sports bles: Sports, pho instrumen	otographic, exercise, and o	other hobby equipment; bicycle	es, pool tables, golf clubs, skis; canoes and	kayaks; carpentry tools; musical
■ No □ Yes.	. Describe				
10. Firear <i>Exam</i>		fles, shotguns, ammunitio	on, and related equipment		
■ No □ Yes.	. Describe				
11. Clothe					
Exam ■ No	nples: Everyday	clothes, furs, leather coat	s, designer wear, shoes, acce	ssories	
☐ Yes.	. Describe				
_		jewelry, costume jewelry,	engagement rings, wedding ri	ngs, heirloom jewelry, watches, gems, gold,	silver
■ No □ Yes.	. Describe				
	arm animals nples: Dogs, cat	s, birds, horses			
■ No □ Yes	. Describe				
		and household items vo	ou did not already list inclu	ding any health aids you did not list	
■ No	ther personal	and nousenoid items ye	ou did not all eady not, meta-	any neath alds you did not list	
☐ Yes.	. Give specific	information			
			from Part 3, including any e	ntries for pages you have attached for	\$950.00
	escribe Your Fir				
Do you o	wn or have an	y legal or equitable inte	rest in any of the following?		Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No				κ, and on hand when you file your petition	
■ Yes				 Cash on Hand	\$40.00
				- Con on Hall	
	sits of money		al account of the second of th	and the second of the second o	
			al accounts; certificates of dep ccounts with the same institut	osit; shares in credit unions, brokerage housion, list each.	ses, and other similar
☐ No					

Official Form 106A/B

page 2

Schedule A/B: Property

Debtor 1	Deichler, Jo	nathan	М.	Case number (if known)	
■ Yes	i			Institution name:	
		17.1.	Checking Account	Dime Bank	\$0.00
		17.2.	Checking Account	Wells Fargo Bank	\$2.00
		17.3.	Savings Account	PNC Bank	\$0.00
	s, mutual funds, on ples: Bond funds,			e firms, money market accounts	
■ No □ Yes	i		Institution or issuer name	r.	
joint	oublicly traded sto venture	ock and i	interests in incorporated	and unincorporated businesses, including an interest in	an LLC, partnership, and
■ No □ Yes	s. Give specific info		about them me of entity:	% of ownership:	
Nego Non-i ■ No	otiable instruments	include p ents are t rmation a	ersonal checks, cashiers' on the cashiers' of the cash	and non-negotiable instruments checks, promissory notes, and money orders. a someone by signing or delivering them.	
	ement or pension nples: Interests in I			, thrift savings accounts, or other pension or profit-sharing pl	ans
■ Yes	:. List each account	Туре	ely. of account: k) or Similar Plan	Institution name: Lowe's	\$0.00
Your <i>Exan</i> ■ No	nples: Agreements	deposits	you have made so that yo	u may continue service or use from a company utilities (electric, gas, water), telecommunications companies, of Institution name or individual:	or others
	ities (A contract fo	r a neriod	ic navment of money to yo	u, either for life or for a number of years)	
■ No	·		ne and description.	a, out of for the different of years)	
24. Interes		n IRA, in	an account in a qualifie	d ABLE program, or under a qualified state tuition progra	am.
■ No □ Yes	In	stitution r	name and description. Sep	arately file the records of any interests.11 U.S.C. § 521(c):	
25. Trusts	s, equitable or fut	ure inter	rests in property (other t	han anything listed in line 1), and rights or powers exerci	sable for your benefit
	s. Give specific infe	ormation	about them		
			s, trade secrets, and others, websites, proceeds from	er intellectual property n royalties and licensing agreements	
	s. Give specific infe	ormation	about them		

Official Form 106A/B Schedule A/B: Property page 3

Debtor 1	Deichler, Jonathan M.		Case number (if known)	
Exam	ses, franchises, and other general in ples: Building permits, exclusive licens	tangibles es, cooperative association holdings, liquor li	censes, professional licenses	
■ No □ Yes.	. Give specific information about them	l		
Money or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
_	funds owed to you			
■ No □ Yes.	Give specific information about them,	including whether you already filed the return	s and the tax years	
■ No		spousal support, child support, maintenance	e, divorce settlement, property sett	lement
	amounts someone owes you ples: Unpaid wages, disability insuranc unpaid loans you made to some	e payments, disability benefits, sick pay, vac one else	ation pay, workers' compensation	Social Security benefits;
☐ Yes.	Give specific information			
Exam ■ No		e; health savings account (HSA); credit, home	eowner's, or renter's insurance	
☐ Yes.	Name the insurance company of each Company nam		eneficiary:	Surrender or refund value:
If you died. No	terest in property that is due you fr are the beneficiary of a living trust, exp Give specific information	om someone who has died ect proceeds from a life insurance policy, or	are currently entitled to receive prop	perty because someone has
	s against third parties, whether or naples: Accidents, employment disputes	ot you have filed a lawsuit or made a den , insurance claims, or rights to sue	nand for payment	
_	. Describe each claim			
	Cla	ss Action Claim Against Juell		unknown
■ No	contingent and unliquidated claims . Describe each claim	of every nature, including counterclaims	s of the debtor and rights to set	off claims
■ No	nancial assets you did not already l Give specific information	st		
		s from Part 4, including any entries for pa		\$42.00
Part 5: De	escribe Any Business-Related Property	You Own or Have an Interest In. List any real e	estate in Part 1.	
No. G	own or have any legal or equitable inter o to Part 6.	est in any business-related property?		
	Go to line 38.	Oaks I Is A/D D		
Official For	m Tuga/B	Schedule A/B: Property		page 4

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Deb	tor 1 Deichler, Jonathan M.		Case number (if known)	
Part	6: Describe Any Farm- and Commercial Fishing-Related Property You If you own or have an interest in farmland, list it in Part 1.	Own or Have an Intere	st In.	
46. I	Do you own or have any legal or equitable interest in any farm- o ■ No. Go to Part 7. ☐ Yes. Go to line 47.	or commercial fishing	g-related property?	
Part	7: Describe All Property You Own or Have an Interest in That You	u Did Not List Above		
	Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No Yes. Give specific information Add the dollar value of all of your entries from Part 7. Write tha			\$0.00
55.	Part 1: Total real estate, line 2			\$0.00
56.		\$0.00		
57.	Part 3: Total personal and household items, line 15	\$950.00		
58.	Part 4: Total financial assets, line 36	\$42.00		
59.	Part 5: Total business-related property, line 45	\$0.00		
60.	Part 6: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7: Total other property not listed, line 54 +	\$0.00		
62.	Total personal property. Add lines 56 through 61	\$992.00	Copy personal property total	sal \$992.00
63.	Total of all property on Schedule A/B. Add line 55 + line 62			\$992.00

Official Form 106A/B Schedule A/B: Property page 5

Fill in thi	is information to identil	y your case:	
Debtor 1	Jonathan M. Dei		
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse if, filing)	First Name	Middle Name	Last Name
		MIDDLE DISTRICT OF I	PENNSYLVANIA, WILKES-BARRE
United States Ba	inkruptcy Court for the:	DIVISION	
Case number			
(if known)			
()			

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify	the Property	You Clain	n as Exempt
---------	----------	--------------	-----------	-------------

1	Which set of exemptions	ara vau claimina?	Chack and ank	oven if your end	use is filing with you
Ι.	WILLIAM OF CHECKELLING	are vou ciaillilliu:	CHECK OHE OHIV.	. everi ii vuur anu	use is illilla will i vol

- ☐ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	, , , , , , , , , , , , , , , , ,		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
Furniture Line from Schedule A/B 6.1	\$250.00		\$250.00	11 USC § 522(d)(5)
			100% of fair market value, up to any applicable statutory limit	
Appliances and Kitchenware	\$100.00		\$100.00	11 USC § 522(d)(3)
Ellie Holli ediledale /VZ G.E			100% of fair market value, up to any applicable statutory limit	
Electronics Line from Schedule A/B 7.1	\$600.00		\$600.00	11 USC § 522(d)(3)
Life from General A.E. 111			100% of fair market value, up to any applicable statutory limit	
Cash on Hand Line from Schedule A/B 16.1	\$40.00		\$40.00	11 USC § 522(d)(5)
End non sonodulo A/D 19.1			100% of fair market value, up to any applicable statutory limit	
Wells Fargo Bank	\$2.00		\$2.00	11 USC § 522(d)(5)
Line Holli Golleddie A/D. 11.2			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 2

3.	Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)					
		No				
		Yes.	Did you acquire the property covered by the exemption within 1,215 days before you filed this case?			
			No			
			Yes			

Fill in th				
Debtor 1	Jonathan M. Deid	chler		
	First Name	Middle Name	Last Name)
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	BARRE			
Case number				
(if known)				☐ Check if this is an amended filing

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
 - No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below.

Official Form 106D

Schedule D: Creditors Who Have Claims Secured by Property

Fill	in this infor	mation to identify you	ur case:						
Debto	r 1	Jonathan M. Deid	chler						
		First Name	Middle Name)	Last Name		}		
Debto (Spouse	r 2 e if, filing)	First Name	Middle Name	1	Last Name				
United	d States Bank	cruptcy Court for the:	MIDDLE DISTE	RICT OF PEN	NSYLVANIA, V	WILKES-BARR	RE		
(if know	number n)							П	Check if this is an
Ì								_	mended filing
O.(400E/E							
	ial Form		<i>(</i>) - 11 11						40/45
		F: Creditors W							12/15 ns. List the other party to
the Con	ntinuation Pag ımber (if know	e to this page. If you ha	ve no information t						boxes on the left. Attach write your name and
1. Do	any creditors	s have priority unsecure	d claims against y	ou?					
	No. Go to Par	t 2.							
	Yes.								
Don't O	I tot All	of Varia MONDDIODIT	V I I						
Part 2		of Your NONPRIORIT							
_		s have nonpriority unsec	_	•					
		nothing to report in this p	art. Submit this form	to the court wi	th your other sch	edules.			
	Yes.								
un	secured claim,	onpriority unsecured clist the creditor separately holds a particular claim, li	y for each claim. For	each claim list	ed, identify what	type of claim it is	. Do not list clair	ns already incl	
									Total claim
4.1	Ally Fina	ncial	La	st 4 digits of a	ccount number	9932			\$7,134.73
	Nonpriority (Creditor's Name		nen was the de	ht incurred?				
	PO Box 3	380902	VVI	ien was the de	ibi iliculrea i				-
		gton, MN 55438-09	02						
		eet City State Zip Code	As	of the date yo	u file, the claim	is: Check all tha	at apply		
	_	ed the debt? Check one.	_						
■ Debtor 1 only □ Contingent									
	Debtor 2	-		Unliquidated					
		and Debtor 2 only	_	Disputed	ODITY unacquir	ad alaimı			
	_	one of the debtors and and		Student loans	ORITY unsecure	su Cidiiii.			
	☐ Check if debt	this claim is for a com			sing out of a sen	aration agreeme	nt or divorce tha	t vou did not	
		subject to offset?		oort as priority o		aradori agreeme	or aivorce tha	. you ald fiel	
	■ No			Debts to pensi	on or profit-shari	ng plans, and oth	ner similar debts		
	☐ Yes			Other Specify	Balance C	wed on BM	w		

Schedule E/F: Creditors Who Have Unsecured Claims

Page 1 of 6

Debtor 1 Deichler, Jonathan M.		Case number (f known)				
4.2	Community Bank, NA Nonpriority Creditor's Name	Last 4 digits of account number	9442	\$16,781.47		
	Recovery Department PO Box 509	When was the debt incurred?				
	Canton, NY 13617-0509 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply			
	Debtor 1 only	Contingent				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	☐ Unliquidated☐ Disputed				
	☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured Student loans	d claim:			
	No	Debts to pension or profit-sharin	g plans, and other similar debts			
	□ Yes	·	wed on Repossessed Vehicle			
4.3	Direct TV	Last 4 digits of account number	4791	\$1,000.00		
	Nonpriority Creditor's Name	When was the debt incurred?				
	PO Box 6550 Greenwood Village, CO 80155-6550 Number Street City State Zip Code	As of the date you file, the claim is: Check all that apply				
	Who incurred the debt? Check one.	•				
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured				
	☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not			
	Is the claim subject to offset?	report as priority claims				
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Utility Expe	ense			
4.4	Home Credit Nonpriority Creditor's Name	Last 4 digits of account number	5258	\$688.37		
	Nonphonty Creditors Name	When was the debt incurred?				
	PO Box 2394 Omaha, NE 68103-2394					
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Cneck all that apply			
	■ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
	No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	■ Other. Specify Credit Card	d .			

Schedule E/F: Creditors Who Have Unsecured Claims

Page 2 of 6

Debt	or 1 Deichler, Jonathan M.	Case number (f known)					
4.5	PayPal Credit Services Nonpriority Creditor's Name	Last 4 digits of account number	\$3,000.00				
	Nonpriority Creditor's Name	When was the debt incurred?					
	P.O. Box 960080 Orlando, FL 32896-0080 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ■ No	□ Disputed Type of NONPRIORITY unsecured claim: □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts					
	☐ Yes	■ Other. Specify On-line Credit Account					
4.6	Sprint Headquarters Nonpriority Creditor's Name	Last 4 digits of account number	\$1,116.75				
	6200 Sprint Pkwy Overland Park, KS 66251-6117 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only	☐ Contingent ☐ Unliquidated ☐ Disputed					
	☐ At least one of the debtors and another☐ Check if this claim is for a community debt Is the claim subject to offset?	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	Other Specify Utility Expense					
4.7	Synchrony Bank Nonpriority Creditor's Name 45-49 Court St	Last 4 digits of account number 7092 When was the debt incurred?	\$2,769.77				
	Canton, NY 13617-1179 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply					
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated					
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this plain is for a community.	☐ Disputed Type of NONPRIORITY unsecured claim: ☐ Student loans					
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts					
	Yes	■ Other. Specify Credit Card					

Schedule E/F: Creditors Who Have Unsecured Claims

Page 3 of 6

Debto	Deichler, Jonathan M.		Case number (f known)							
4.8	T-Mobile Customer Relations Nonpriority Creditor's Name	Last 4 digits of account number	0437	\$3,071.67						
	Nonpholity Creditor's Name	When was the debt incurred?								
	PO Box 37380 Albuquerque, NM 87176-7380 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply							
	■ Debtor 1 only	☐ Contingent								
	Debtor 2 only	☐ Unliquidated								
	Debtor 1 and Debtor 2 only	☐ Disputed								
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:							
	☐ Check if this claim is for a community	☐ Student loans								
	debt Is the claim subject to offset?		ration agreement or divorce that you did not							
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts							
	☐ Yes	■ Other. Specify Utility Expe								
4.9	The Dime Bank	Last 4 digits of account number	6501	\$400.00						
	Nonpriority Creditor's Name		40/0040							
	820 Church St Honesdale, PA 18431-1825	When was the debt incurred?	10/2019							
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply							
	Who incurred the debt? Check one.	_								
	Debtor 1 only	☐ Contingent								
	Debtor 2 only	☐ Unliquidated								
	☐ Debtor 1 and Debtor 2 only	☐ Disputed	·							
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:								
	Check if this claim is for a community	☐ Student loans								
	debt Is the claim subject to offset?	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 								
	No									
		, ,								
	☐ Yes	Other. Specify Insufficien	t Funds							
4.10	The Dime Bank Nonpriority Creditor's Name	Last 4 digits of account number	3317	\$1,585.79						
	Nonphony Oreator 3 Name	When was the debt incurred?								
	PO Box 790408 Saint Louis, MO 63179-0408									
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply							
	Who incurred the debt? Check one.									
	■ Debtor 1 only	☐ Contingent								
	Debtor 2 only									
	☐ Debtor 1 and Debtor 2 only									
	\square At least one of the debtors and another	d claim:								
	\square Check if this claim is for a community debt	0 0 1	ration agreement or divorce that you did not							
	Is the claim subject to offset?	report as priority claims								
	No	Debts to pension or profit-sharing								
	Yes	■ Other. Specify Credit Care	d							

Schedule E/F: Creditors Who Have Unsecured Claims

Page 4 of 6

Debtor 1	Deichler,	Jonathan M.		Case n	number (f known)						
4.11	Vivint Hom	e Security	Last 4 digits of account number	r 891 1	I	\$1,000.00					
	Nonpriority Cred	ditor's Name	When was the debt incurred?								
	62992 Colle	ection Dr - 60601-0629	when was the debt incurred?								
		City State Zip Code	As of the date you file, the claim	n is: Chec	k all that apply						
	Who incurred t	the debt? Check one.									
	Debtor 1 on	ly	☐ Contingent								
	Debtor 2 on	ly	☐ Unliquidated								
	Debtor 1 and	d Debtor 2 only	☐ Disputed								
	At least one	of the debtors and another	Type of NONPRIORITY unsecured claim:								
		is claim is for a community	Student loans								
	debt Is the claim su	bject to offset?		paration a	greement or divorce that you did not						
	_	bject to onset?	report as priority claims Debts to pension or profit-shar	ring plane	and other similar debts						
	■ No		·								
	☐ Yes		Other. Specify Security	System							
Part 3:	List Others	s to Be Notified About a De	bt That You Already Listed								
is tryin have m	g to collect fro	m you for a debt you owe to s	omeone else, list the original creditor i at you listed in Parts 1 or 2, list the add	in Parts 1	dy listed in Parts 1 or 2. For example, i or 2, then list the collection agency he editors here. If you do not have additio	re. Similarly, if you					
	d Address	_	On which entry in Part 1 or Part 2 did yo		=						
Convergent Outsourcing 800 SW 39th St			`		Creditors with Priority Unsecured Claims						
Renton, WA 98057-4975				Part 2:	Creditors with Nonpriority Unsecured Cla	iims					
	.,		Last 4 digits of account number	0	1437						
				Part 1:	original creditor? Creditors with Priority Unsecured Claims Creditors with Nonpriority Unsecured Cla						
Hawley	, PA 18428	3-7059				uitis					
			Last 4 digits of account number	/	7092						
	d Address	. A D.C	On which entry in Part 1 or Part 2 did yo		•						
	•	ve Southpointe			Creditors with Priority Unsecured Claims Creditors with Nonpriority Unsecured Cla						
Canon	sburg, PA 1	15317	Last 4 digits of account number	7	7092						
Part 4:		mounts for Each Type of U		reporting	purposes only. 28 U.S.C. §159. Add th	e amounts for each					
	unsecured cla		anns. This information is for statistical	reporting	purposes only. 20 0.0.0. § 100. Aud th	c amounts for caon					
					Total Claim						
	6a.	Domestic support obligation	ns	6a.	\$ 0.00						
Total cla		Tayon and partain other deb	to you awa the government	6h							
IIOIII Fai	t 1 6b. 6c.	Taxes and certain other deb Claims for death or persona	I injury while you were intoxicated	6b. 6c.	\$ <u>0.00</u> \$ 0.00						
	6d.	•	secured claims. Write that amount here.	6d.	\$ 0.00						
					·	_					
	6e.	Total Priority. Add lines 6a th	rough 6d.	6e.	\$						
					Total Claim						
	6f.	Student loans		6f.	\$ 0.00						
Total cla		Obligations a laboration									
from Par	t 2 6g.	Obligations arising out of a you did not report as priority	separation agreement or divorce that y claims	6g.	\$ 0.00						
	6h.	Debts to pension or profit-sl	haring plans, and other similar debts	6h.	\$ 0.00						
	6i.	Other. Add all other nonpriorit	y unsecured claims. Write that amount	6i.	\$ 38,548.55						

Schedule E/F: Creditors Who Have Unsecured Claims

Page 5 of 6

6j. Total Nonpriority. Add lines 6f through 6i.

5j. \$ **38,548.55**

Fill in th	Fill in this information to identify your case:							
Debtor 1 Jonathan M. Deichler								
	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse if, filing)	First Name	Middle Name	Last Name					
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF DIVISION	PENNSYLVANIA, WILKES-BA	ARRE				
Case number								
(if known)								

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	r company with Name, Number	whom you have the Street, City, State and ZIP	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					<u></u>
	Name				
	Number	Street			_
					_
	City		State	ZIP Code	
2.3					<u></u>
	Name				
	Missalaaa	04			<u> </u>
	Number	Street			
	City		State	ZIP Code	<u> </u>
0.4	City		State	ZIP Code	
2.4					<u> </u>
	Name				
	Number	Street			_
		0001			
	City		State	ZIP Code	_
2.5	,				
	Name				_
	1101110				
	Number	Street			_
				715.0	_
	City		State	ZIP Code	

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

Page 1 of 1

					•
	Fill in this information to ide	ntify your case:			
Debtor 1	Jonathan M. D				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse if,	filing) First Name	Middle Name	Last Name		
United S	tates Bankruptcy Court for the		PENNSYLVANIA, WILK	ES-BARRE	
Case nui	mber				
(if known)					☐ Check if this is an amended filing
Sche	al Form 106H dule H: Your Co		ts you may have. Be as	complete and accurat	12/15 te as possible. If two married people
and num		on the left. Attach the Addit			opy the Additional Page, fill it out, ditional Pages, write your name and
1. Do	you have any codebtors?	If you are filing a joint case, d	lo not list either spouse as	a codebtor.	
■ N	0				
☐ Ye	es				
	ithin the last 8 years, have y ornia, Idaho, Louisiana, Neva				states and territories include Arizona,
■ N	o. Go to line 3.				
☐ Ye	es. Did your spouse, former sp	ouse, or legal equivalent live v	with you at the time?		
line 1060	2 again as a codebtor only if	that person is a guarantor	or cosigner. Make sure	you have listed the c	with you. List the person shown in reditor on Schedule D (Official Forn lle E/F, or Schedule G to fill out
	Column 1: Your codebtor Name, Number, Street, City, State ar	nd ZIP Code		Column 2: The cre Check all schedul	editor to whom you owe the debt es that apply:
3.1				☐ Schedule D, lir	ne
	Name			□ Schedule E/F,	
				☐ Schedule G, lir	ne
	Number Street City	State	ZIP Code	_	
3.2				☐ Schedule D, lir	ne
	Name			□ Schedule E/F,	line
				☐ Schedule G, lir	ne
	Number Street City	State	ZIP Code	_	

Schedule H: Your Codebtors

Debtor 1										
Debtor 2 Spooze, if tiling)	Fill	in this information to identify your ca	se:							
United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE DIVISION Case number (# Novem) Check if this is: C	Deb	otor 1 Jonathan M.	Deichler			_				
Case number (If known) Check if this is:						_				
Official Form 106I Schedule I: Your Income Be as complete and accurate as possible. If two married people are filling together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filling jointly, and your spouse is living with you, include information about your spouse is not filling with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed with information about additional employers. Occupation may include student or Employer's name self-employed work. Occupation may include student or Employer's address homemaker, if it applies. How long employed there? Fart 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A 3. Estimate and list monthly overtime pay.	Uni	ted States Bankruptcy Court for the:			,	_				
Be as complete and accurate as possible, if two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Part 1: Describe Employment 1. Fill in your employment information. If you have more than one job, attach a separate page with information. If you have more than one job, attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or how long employer's address homemaker, if it applies. How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 2. \$ 0.00 \$ N/A deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A				-			☐ An amende☐ A suppleme	ed filing ent showing p		chapter 13
Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are separated and your spouse is not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question. Fart 1:	O	fficial Form 106I					MM / DD/ \			
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If you have more than one job, attach a separate page with information about additional employers. Occupation Include part-time, seasonal, or self-employed work. Occupation may include student or how long employer's name Employer's name Employer's address How long employed there? Part 2: Give Details About Monthly Income Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A N/A	sup _l spoi	plying correct information. If you a use. If you are separated and your ch a separate sheet to this form. O	re married and not filin spouse is not filing wit	g jointly, and your h you, do not inclu	spouse is de informa	living ation a	with you, included bout your spou	de informationse. If more s	n about yo pace is nee	our eded,
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How long employed there? Fart 2: Give Details About Monthly Income			•							
Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated. If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form. For Debtor 1 For Debtor 2 or non-filing spouse List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A			Employer's address							
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List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. For Debtor 1 For Debtor 2 or non-filing spouse 2. \$ 0.00 \$ N/A +\$ N/A			te you file this form. If y	ou have nothing to re	eport for an	y line, v	write \$0 in the sp	ace. Include y	our non-filin	ng spouse
List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$ 0.00 \$ N/A 3. Estimate and list monthly overtime pay. 3. +\$ 0.00 +\$ N/A				bine the information f	or all emplo	oyers fo	or that person on	the lines belo	w. If you ne	ed more
2. deductions). If not paid monthly, calculate what the monthly wage would be. 2. \$						F	or Debtor 1			
	2.				2.	\$	0.00	\$	N/A	
4. Calculate gross Income. Add line 2 + line 3. 4. \$\[\\$ \] \[\]	3.	Estimate and list monthly overting	ne pay.		3.	+\$ _	0.00	+\$	N/A	
	4.	Calculate gross Income. Add line	e 2 + line 3.		4.	\$_	0.00	\$	N/A	

Official Form 106l Schedule I: Your Income page 1

	_	Deichler, Jonathan M.	_			_		
				For I	Debtor 1	For Debtor non-filing s		
	Copy	y line 4 here	4.	\$	0.00	\$	N/A	
5.	List	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	0.00	\$	N/A	
	5b.	Mandatory contributions for retirement plans	5b.	<u>\$</u> —	0.00	\$	N/A	
	5c.	Voluntary contributions for retirement plans	5c.	<u>\$</u> —	0.00	\$	N/A	
	5d.	Required repayments of retirement fund loans	5d.	<u>\$</u> —	0.00	\$	N/A	
	5e.	Insurance	5e.	<u>\$</u> —	0.00	\$	N/A	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	N/A	
	5g.	Union dues	5g.	<u>\$</u> —	0.00	\$	N/A	
	5h.	Other deductions. Specify:	5h.+	· \$	0.00	·	N/A	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	— 6.	\$	0.00	\$	N/A	
		ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$ \$	0.00	\$	N/A	
	List a 8a.	All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	90	\$		C		
	8b.	Interest and dividends	8a. 8b.	φ	750.00	\$ \$	N/A	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$ \$	0.00	\$\$	N/A N/A	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	N/A	
	8e.	Social Security	8e.	\$	0.00	\$	N/A	
	8f. 8g.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: Food Stamps Pension or retirement income	— ^{8f.} 8g.	\$	190.00 0.00	\$	N/A N/A	
	og. 8h.	Other monthly income. Specify:	8h.⊣	· Ť —		+ \$	N/A	
	011.				0.00	΄	11//	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	940.00	\$	N/A	
		ulate monthly income. Add line 7 + line 9.	10. \$		940.00 + \$	N/A	= \$	940.00
	Add	the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	L					
	Incluother	e all other regular contributions to the expenses that you list in Schedule and contributions from an unmarried partner, members of your household, your defineds or relatives. ot include any amounts already included in lines 2-10 or amounts that are not avairies:	pender		·		+\$	0.00
		the amount in the last column of line 10 to the amount in line 11. The result that amount on the Summary of Schedules and Statistical Summary of Certain					\$	940.00
		•					Combine	

Official Form 106l Schedule I: Your Income page 2

13. Do you expect an increase or decrease within the year after you file this form?

No.

Yes. Explain:

Fill	in this information to identify you	ır case:				
Deb	tor 1 Jonathan M.	Deichler		Chec	k if this is:	
	tor 2				An amended filing A supplement show expenses as of the f	ing postpetition chapter 13
` '	ed States Bankruptcy Court for the:	MIDDLE DISTRICT OF PENNSYL' WILKES-BARRE DIVISION	VANIA,	_	MM / DD / YYYY	onowing date.
	e number	WEREO-BARRE DIVISION				
(If ki	nown)					
	fficial Form 106J chedule J: Your E					12/15
Be info	as complete and accurate as pormation. If more space is nee	oossible. If two married people are to ded, attach another sheet to this fo				supplying correct
	nown). Answer every questio					
Par 1.	Is this a joint case?	old				
	■ No. Go to line 2. ☐ Yes. Does Debtor 2 live in	a separate household?				
	☐ No ☐ Yes. Debtor 2 must	tille Official Form 106J-2, Expenses for	or Separate Househ	oldof Debtor	2.	
2.	Do you have dependents?	■ No				
	Do not list Debtor 1 and Debtor 2.	Yes. Fill out this information for each dependent	Dependent's relati Debtor 1 or Debtor		Dependent's age	Does dependent live with you?
	Do not state the					□ No
	dependents names.					☐ Yes ☐ No
						☐ Yes
						□ No
						Yes
						□ No
3.	Do your expenses include	-				Yes
J.	expenses of people other the yourself and your dependen	- IIVes				
Par						
exp		ur bankruptcy filing date unless yo ankruptcy is filed. If this is a supple				
		on-cash government assistance if y re included it on Schedule I: Your Ir				
(Off	icial Form 106l.)				Your expe	enses
4.	The rental or home ownersh payments and any rent for the	ip expenses for your residence. Inc ground or lot.	elude first mortgage	4. \$		0.00
	If not included in line 4:					
	4a. Real estate taxes			4a. \$		0.00
	4b. Property, homeowner's,			4b. \$		0.00
	•	pair, and upkeep expenses		4c. \$		0.00
5.		on or condominium dues onts for your residence, such as hom	e equity loans	4d. \$ 5. \$		0.00

Official Form 106J Schedule J: Your Expenses page 1

Debtor 1	Deichler	, Jonathan M.	Case num	nber (if known)	
s. Utili	ities:				
6a.		heat, natural gas	6a.	\$	0.00
6b.		ver, garbage collection	6b.		0.00
				· : ———	
6c.	•	e, cell phone, Internet, satellite, and cable services	6c.	·	126.00
6d.	Other. Spe	·	6d.		0.00
		ekeeping supplies	7.	\$	190.00
B. Chi	Idcare and c	hildren's education costs	8.	\$	0.00
. Clo	thing, laund	ry, and dry cleaning	9.	\$	0.00
0. Per s	sonal care p	roducts and services	10.	\$	0.00
1. Med	dical and de	ntal expenses	11.	\$	0.00
2. Tra i	nsportation.	Include gas, maintenance, bus or train fare.		· 	
Doı	not include ca	ar payments.	12.	\$	0.00
3. Ent	ertainment,	clubs, recreation, newspapers, magazines, and books	13.	\$	0.00
I. Cha	aritable cont	ributions and religious donations	14.	\$	0.00
. Insu	urance.	•		·	
Doı	not include in	surance deducted from your pay or included in lines 4 or 20.			
	. Life insura		15a.	\$	0.00
15b	. Health ins	urance	15b.	\$	0.00
	. Vehicle ins		15c.		0.00
		rance. Specify:	15d.	·	
				Ψ	0.00
	ecify:	clude taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	·			Ψ	0.00
		ease payments: ents for Vehicle 1	170	¢	0.00
			17a.		0.00
		ents for Vehicle 2	17b.	·	0.00
	. Other. Spe	· ·	17c.		0.00
	. Other. Spe	·	17d.	\$	0.00
		of alimony, maintenance, and support that you did not report a		•	0.00
		our pay on line 5, Schedule I, Your Income (Official Form 106I).	. 18.		
9. Oth	er payments	you make to support others who do not live with you.		\$	0.00
	ecify:		19.		
		erty expenses not included in lines 4 or 5 of this form or on Sch			
20a	 Mortgages 	on other property	20a.		0.00
20b	 Real estate 	e taxes	20b.	\$	0.00
20c	. Property, h	nomeowner's, or renter's insurance	20c.	\$	0.00
20d	. Maintenan	ce, repair, and upkeep expenses	20d.	\$	0.00
		er's association or condominium dues	20e.		0.00
	er: Specify:			+\$	
. Jul	or opecity.	-		- Ψ	0.00
2. Cal	culate your i	monthly expenses			
22a	. Add lines 4	through 21.		\$	316.00
22b	. Copy line 2	2 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	2	\$	
		a and 22b. The result is your monthly expenses.		· —	216.00
220	. Auu iiiie 228	a and 22b. The result is your monthly expenses.		φ	316.00
3. Cal	culate your i	monthly net income.			
23a	. Copy line	12 (your combined monthly income) from Schedule I.	23a.	\$	940.00
23b	. Copy your	monthly expenses from line 22c above.	23b.	-\$	316.00
	, , , ,	• •			
23c	. Subtract v	our monthly expenses from your monthly income.			
		is your monthly net income.	23c.	\$	624.00
For e	you expect a example, do yo lification to the	an increase or decrease in your expenses within the year after you expect to finish paying for your car loan within the year or do you expect yearms of your mortgage?			or decrease because of a
I	No.				
	Yes.	Explain here:			

United States Bankruptcy Court Middle District of Pennsylvania, Wilkes-Barre Division

IN RE:	Case No.				
Deichler, Jonathan M.	Chapter 7				
Debtor(s)	`				
BUSINESS INCOME AND EXPENSE	ES				
FINANCIAL REVIEW OF THE DEBTOR'S BUSINESS (Note: ONLY INCLUD	$\underline{\mathrm{E}}$ information direc	tly related to	the business		
operation.)					
PART A - GROSS BUSINESS INCOME FOR THE PREVIOUS 12 MONTHS:					
1. Gross Income For 12 Months Prior to Filing:	\$				
PART B - ESTIMATED AVERAGE FUTURE GROSS MONTHLY INCOME:					
2. Gross Monthly Income:		\$	750.00		
PART C - ESTIMATED FUTURE MONTHLY EXPENSES:					
3. Net Employee Payroll (Other Than Debtor)	\$				
4. Payroll Taxes	\$				
5. Unemployment Taxes	\$				
6. Worker's Compensation	\$				
7. Other Taxes	\$				
8. Inventory Purchases (Including raw materials)	\$				
9. Purchase of Feed/Fertilizer/Seed/Spray	\$				
10. Rent (Other than debtor's principal residence)	\$				
11. Utilities	\$				
12. Office Expenses and Supplies	\$				
13. Repairs and Maintenance	\$				
14. Vehicle Expenses	\$				
15. Travel and Entertainment	\$				
16. Equipment Rental and Leases	\$				
17. Legal/Accounting/Other Professional Fees	\$				
18. Insurance	\$				
19. Employee Benefits (e.g., pension, medical, etc.)	\$				
20. Payments to be Made Directly by Debtor to Secured Creditors for Pre-Petition					
Business Debts (Specify):	\$				
21. Other (Specify):	\$				
22. Total Monthly Expenses (Add items 3-21)		\$			
PART D - ESTIMATED AVERAGE <u>NET</u> MONTHLY INCOME					
23 AVERAGE NET MONTHLY INCOME (Subtract Item 22 from Item 2)		\$	750.00		

Fill in this in	formation to identify yo	our case:			
Debtor 1	Jonathan M. Deid	chler			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the:	MIDDLE DISTRICT OF DIVISION	PENNSYLVANIA, WILKES-	BARRE	
Case number (if known)					☐ Check if this is an amended filing
Official Form		an Individua	l Debtor's Scl	hedules	12/15
obtaining money years, or both. 18		connection with a bank			ent, concealing property, or or imprisonment for up to 20
Did you pay	y or agree to pay some	one who is NOT an attori	ney to help you fill out ban	kruptcy forms?	
■ No					
☐ Yes. N	Name of person				rruptcy Petition Preparer's Notice, and Signature (Official Form 119)
	Ity of perjury, I declare to true and correct.	that I have read the sumi	mary and schedules filed w	ith this declaration	and
X /s/.lon	athan M. Deichler		Х		
Jonath	nan M. Deichler re of Debtor 1		Signature of D	ebtor 2	
Date I	November 26, 2019		Date		

						_				
Fill ir	n this infor	mation to identify your case:							irected in this form and	in Form
Debt	tor 1	Jonathan M. Deichler				12	2A-1S	upp:		
Debt (Spou	tor 2 se, if filing)						■ 1. 7	There is no pres	umption of abuse	
Unite	ed States I	Middle Dist Wilkes-Barn		ennsylvania, on				applies will be m	o determine if a presu nade under <i>Chapter 7 N</i> cial Form 122A-2).	•
Case (if kno	e number						□ 3. 1	The Means Test	does not apply now beout it could apply later.	cause of qualified
							□ Cr	neck if this is a	n amended filing	
Off	icial F	orm 122A - 1							3	
		7 Statement of Your	Curr	ant Mar	1thl	v Inc	٥m	Δ		40/40
CII	apter	7 Statement of Tour	Guii	CIT INIOI	ILI II	y IIIC	OIII	<u> </u>		10/19
a sepa	arate sheet er (if know ry service,	and accurate as possible. If two married p to this form. Include the line number to w n). If you believe that you are exempted fr complete and file Statement of Exemption liculate Your Current Monthly Income	hich the om a pre	additional info	matior use be	n applies. cause yo	On the	top of any addit	ional pages, write your consumer debts or beca	name and case ause of qualifying
1.	What is y	our marital and filing status? Check	ne only							
	■ Not m	arried. Fill out Column A, lines 2-11.								
		ed and your spouse is filing with you.	Fill out	both Columns	A and	B, lines 2	2-11.			
	☐ Marrie	ed and your spouse is NOT filing with	you. Y	ou and your s	pouse	are:				
	□Livi	ng in the same household and are no	t legall	, separated. F	ïll out l	ooth Colu	ımns A	A and B, lines 2-	11.	
	per	ng separately or are legally separated alty of perjury that you and your spouse art for reasons that do not include evading	are lega	lly separated ur	nder no	onbankru	ptcy la	w that applies or		
10 6 i	01(10A). For months, add	erage monthly income that you received fi example, if you are filing on September 15, the income for all 6 months and divide the t rental property, put the income from that pro	the 6-moi otal by 6.	nth period would Fill in the result.	be Mar Do not	ch 1 throu include a	igh Aug ny inco	gust 31. If the amo me amount more t	unt of your monthly incom han once. For example, it	ne varied during the
					·		Colu		Column B Debtor 2 or non-filing spouse	
2.	Your gro payroll de	ss wages, salary, tips, bonuses, over ductions).	time, an	nd commission	ns (bet	ore all	\$	1,206.95	\$	
	Column E	and maintenance payments. Do not in its filled in.	•	,	•		\$	0.00	\$	
4.	of you or from an un roommate	nts from any source which are regular your dependents, including child su nmarried partner, members of your hous es. Include regular contributions from a plude payments you listed on line 2	pport. Ir	nclude regular	contrib	outions	ì. ¢	0.00	e	
_	DO HOL III	nude payments you listed on line 5					» —	0.00	\$	
5.	Net Incor	ne from operating a business, profes	sion, or		otor 1					
	Gross rec	eipts (before all deductions)	\$		9.67					
		and necessary operating expenses	-\$		0.00	•				
	•	nly income from a business,	\$	7	9.67	Copy here ->	\$	79.67	\$	
6.	•	ne from rental and other real property	, –			•	-			
				Del	otor 1					
	Gross rec	eipts (before all deductions)		\$ 0.00						
		and necessary operating expenses		-\$ 0.00						
	Net montl	nly income from rental or other real prop	erty	\$ 0.00	Copy	/ here ->	\$	0.00	\$	

Official Form 122A-1

Chapter 7 Statement of Your Current Monthly Income

0.00

page 1

7. Interest, dividends, and royalties

				Column A Debtor 1		Column B Debtor 2 or non-filing spous	se
8.	Unemployment compensation			\$	0.00	\$	
	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:						_
	For you \$	0.00	0				
	For you \$ For your spouse \$		_				
9.	Pension or retirement income. Do not include any amount under the Social Security Act. Also, except as stated in the rinclude any compensation, pension, pay, annuity, or allowant Government in connection with a disability, combat-related in a member of the uniformed services. If you received any retired 10 title 10, then include that pay only to the extent that it do retired pay to which you would otherwise be entitled if retire title 10 other than chapter 61 of that title.	t received that was a beat sentence, do not ce paid by the United sinjury or disability, or dered pay paid under chaoes not exceed the am	States eath of apter nount	\$	0.00	\$	_
10.	Income from all other sources not listed above. Specify not include any benefits received under the Social Security A victim of a war crime, a crime against humanity, or internation compensation, pension, pay, annuity, or allowance paid by the Government in connection with a disability, combat-related in	Act; payments received nal or domestic terrori ne United States njury or disability, or de	d as a sm; or eath of				
	a member of the uniformed services. If necessary, list other and put the total below.	sources on a separate	e page				
	·			\$	0.00	\$	
			_	\$	0.00	\$	_
	Total amounts from separate pages, if any.		_ +	\$	0.00	\$	
11.	Calculate your total current monthly income. Add lines 2 each column. Then add the total for Column A to the total f		\$	1,286.62	+ \$	= \$	1,286.62
		L			J [otal current monthly
							come
Part	2: Determine Whether the Means Test Applies to Yo	ou 					
12.	Calculate your current monthly income for the year. Fo	llow these steps:					
	12a. Copy your total current monthly income from line 11			Сор	y line 11 h	ere=> \$_	1,286.62
	Multiply by 12 (the number of months in a year)						x 12
	12b. The result is your annual income for this part of the form	m				12b. \$_	15,439.44
13.	Calculate the median family income that applies to you	. Follow these steps:					
	Fill in the state in which you live.	PA					
	Fill in the number of people in your household.	1					
	Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clels office.						
14	How do the lines compare?						
	 Line 12b is less than or equal to line 13. On the top of page 1, check box 17, here is no presumption of abuse. Go to Part 3. Line 12b is more than line 13. On the top of page 1, check box 27 he presumption of abuse is determined by Form 122A-2. 						
	Go to Part 3 and fill out Form 122A-2.						
Part		the fater of the state of the s	-1.				
	By signing here, I declare under penalty of perjury that	the information on this	staten	nent and in a	ny attachm	ents is true and coi	rect.
	X /s/ Jonathan M. Deichler						
	Jonathan M. Deichler Signature of Debtor 1						
	Date November 26, 2019						

Official Form 122A-1

page 2

Debtor 1	Deichler, Jonathan M.	Case number (if known)	
	MM / DD / YYYY		
	If you checked line 14a, do NOT fill out or file Form 122A-2.		

If you checked line 14b, fill out Form 122A-2 and file it with this form.

	Fill in this	s information to identi	fy your case:			•		
De								
	ebtor 1	Jonathan M. Dei	Middle Name	Last Name		}		
1	ebtor 2 oouse if, filing)	First Name	Middle Name	Last Name				
(0)	ouse ii, iiiiig)	i iist ivaine			W 1/E0 DADDE			
Ur	nited States Bar	nkruptcy Court for the:	MIDDLE DISTRICT OF DIVISION	PENNSYLVANIA, W	ILKES-BARRE			
	ase number						Check if this is an amended filing	
St Be info	as complete ar	of Financial And accurate as possibore space is needed, a	Affairs for Indiv	are filing together, b	ooth are equally respons	sible for supply		
_		er every question. Petails About Your Ma	rital Status and Where Yo	u Lived Before				
1.	What is your	current marital status	s?					
	☐ Married							
	■ Not marr	ried						
2.	During the la	uring the last 3 years, have you lived anywhere other than where you live now?						
	□ No		•	•				
		t all of the places you liv	ed in the last 3 years. Do no	nt include where you liv	ve now.			
	Debtor 1 Pri	or Address:	there fountain Dr From-To: ☐ Same as Debtor 1		! Prior Address:		Dates Debtor 2 lived there	
		er Mountain Dr 3 18464-9607			as Debtor 1		☐ Same as Debtor 1 From-To:	
	tes and territorie No Yes. Mak	es include Arizona, Cali	er live with a spouse or le fornia, Idaho, Louisiana, N edule H: Your Codebtors (O	evada, New Mexico, I				
4.	Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filling a joint case and you have income that you receive together, list it only once under Debtor 1.							
	□ No							
	Yes. Fill	in the details.						
			Debtor 1		Debtor 2			
			Sources of income Check all that apply.	Gross income (before deductio	Sources of i Check all tha		Gross income (before deductions	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

page 1

6.	Are either	Debtor 1	's or D	ebtor	2's de	bts pr	imarily	consumer	debts
----	------------	----------	---------	-------	--------	--------	---------	----------	-------

□ No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825* or more?

□ No. Go to line 7.

Uses List below each creditor to whom you paid a total of \$6,825* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

^{*} Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Del	btor 1 Deichler, Jonathan M.		Cas	e number (if known)		
	Yes. Debtor 1 or Debtor 2 or both have During the 90 days before you filed	-		\$600 or more?		
		or to whom you paid a total o c support obligations, such a				
	Creditor's Name and Address	Dates of payment	Total amount	Amount you still owe	Was this pa	yment for
	Wells Fargo		\$600.00	\$0.00	☐ Mortgage	<u> </u>
	Wells I algo		\$500.00	ψ0.00	Car Credit Ca Loan Rep Suppliers Other	ard payment
7.	Within 1 year before you filed for bankrupt Insiders include your relatives; any general par which you are an officer, director, person in cobusiness you operate as a sole proprietor. 11 U	tners; relatives of any genera ntrol, or owner of 20% or mo	al partners; partnershi re of their voting secu	ps of which you are rities; and any man	e a general part laging agent, in	ner; corporations of cluding one for a
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for	this payment
8.	Within 1 year before you filed for bankrupt insider? Include payments on debts guaranteed or cosi No Yes. List all payments to an insider	gned by an insider.	ments or transfer ar	ny property on ac	count of a deb	ot that benefited an
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include cred	this payment litor's name
Pai	rt 4: Identify Legal Actions, Repossession	ns, and Foreclosures	,			
9.	Within 1 year before you filed for bankrupt List all such matters, including personal injury and contract disputes.					
	□ No■ Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of th	e case
	Synchrony Bank v. Jonathan Deichler MJ-6032-CV-0216-2019	Civil Complaint	Pike County C Common Pleas 412 Broad St Milford, PA 18	S	■ Pending □ On appe □ Conclude	eal
10.	Within 1 year before you filed for bankrupt Check all that apply and fill in the details belo		rty repossessed, fo	reclosed, garnish	ed, attached,	seized, or levied?
	No. Go to line 11.					
	Yes. Fill in the information below. Creditor Name and Address	Describe the Property		Date		Value of the
	O. Saltor Haille alla Audi 633			Date		property
		Explain what happened				

Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 Software Copyright (c) 2019 CINGroup - www.cincompass.com

Explain what happened Community Bank 45-49 Court St Canton, NY 13617-1179 Property was repossessed. Property was parished. Property was parished. Property was foreclosed. Property was developed. Property was parished. Property pari	Explain what happened Community Bank 45-49 Court St Canton, NY 13617-1179 Property was repossessed. Property was foreclosed. Property was foreclosed. Property was foreclosed. Property was districted or levied. Amount of the districted or levied. Property was districted or levied. Property or	Debtor 1	Deichler, Jonathan M.		Case number (if known)	
Explain what happened Community Bank 45-49 Court St Canton, NY 13617-1179 Property was repossessed. Property was precised. Property was attached, seized or levied. No	Explain what happened Community Bank 45-49 Court St Canton, NY 13617-1179 Property was repossessed. Property was foreclosed. Property was foreclosed. Property was foreclosed. Property was districted or levied. Amount of the districted or levied. Property was districted or levied. Property or					
Explain what happened 2018 Hyundia Elantra \$16,781.47 \$16,781.47 \$16,781.47 \$2018 Hyundia Elantra \$16,781.47	Explain what happened Community Bank 45-49 Court St Canton, NY 13617-1179	Cre	ditor Name and Address	Describe the Property	Date	Value of the
Community Bank 45-49 Court St Canton, NY 13617-1179 Property was repossessed. Property was proposed. Property was proposed. Property was payarished.	Community Bank 45-49 Court St Canton, NY 13617-1179 Property was repossessed. Property was repossessed. Property was constrained. Property was constrained. Property was constrained. Property was attached, seized or levied.			Explain what happened		property
45-49 Court St Canton, NY 13617-1179 Property was repossessed. Property was foreclosed. Property was foreclosed. Property was granished. Property was discovered as debt?	45-49 Court St Canton, NY 13617-1179 Property was foreclosed. Property was foreclosed. Property was gamished. Property was accounts or refuse to make a payment because you owed a debt? No	Coi	mmunity Bank	•		\$16,781.47
Property was pricelosed. Property was garnished. Property was attached, seized or levied.	Property was gamished. Property was attached, seized or levied.	45-	49 Court St	_		. ,
Property was garnished. Property was attached, seized or levied.	Property was garnished. Property was attached, seized or levied.	Cai	nton, NY 13617-1179			
No No Set Property was attached, seized or levied.	Property was attached, seized or levied.			, ,		
Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No	11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No			_ , , ,	ed.	
accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details. Creditor Name and Address Describe the action the creditor took Date action was taken I 11/2019 Setoff Last 4 digits of account number: 11.2 Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address: Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 Charity's Name Address; whome, street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending lost include the amount that insurance has paid. List pending lost include the amount that insurance has paid. List pending lost include the amount that insurance has paid. List pending lost include the amount that insurance has paid. List pending lost include the amount that insurance has paid. List pending lost include the amount that insurance has paid. List pending lost include the amount that insurance has paid. List pending lost include the amount that insurance has paid. List pending lost include the amount that insurance has paid. List pending lost include the amount that insurance has paid. List pending lost include th	accounts or refuse to make a payment because you owed a debt? New Yes, Fill in the details. Creditor Name and Address Describe the action the creditor took Taken New Ils Fargo11/2019 Setoff Last 4 digits of account number: No Yes Part 5: List Certain Gifts and Contributions Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person to Whom You Gave the Gift and Address: No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 to any charity? No Yes. Fill in the details. Describe what you contributed Dates you contributed No Yes. Fill in the details. Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule AfB: Properly.			· · · · · · · · · · · · · · · · · · ·		
Wells Fargo11/2019 Setoff Last 4 digits of account number:	Wells Fargo11/2019 Setoff Last 4 digits of account number:	acco	ounts or refuse to make a payment b No		or financial institution, set off any a	mounts from your
Last 4 digits of account number:	Last 4 digits of account number:	Cre	ditor Name and Address	Describe the action the creditor took		Amount
12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No	12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No	We	lls Fargo11/2019		11/2019	\$700.00
List Certain Gifts and Contributions	Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? ■ No □ Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No □ Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling? □ No ■ Yes. Fill in the details. Describe the property you lost and how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Date of your loss Value of proper loss	cour	t-appointed receiver, a custodian, o		second of an assignee for the sene.	nt or orcultors, a
3. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No	13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	_				
3. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No	3. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? No	Part 5:	List Cortain Gifts and Contribution	26		
Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No		No Yes. Fill in the details for each gift.			
Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling? No Yes. Fill in the details. Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	pers	son			Value
 No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. 	No ☐ Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling? ☐ No ☐ Yes. Fill in the details. Describe the property you lost and how the loss occurred ☐ Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.					
more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses 15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	=	No		ons with a total value of more than \$	6600 to any charity?
15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling? □ No ■ Yes. Fill in the details. Describe the property you lost and how the loss occurred □ Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. □ No □ Yes. Fill in the details. □ Date of your loss Ice	mor Cha	re than \$600 arity's Name	ŕ		Value
15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster or gambling? □ No ■ Yes. Fill in the details. Describe the property you lost and how the loss occurred □ Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. □ No □ Yes. Fill in the details. □ Date of your loss Ice	Part 6:	List Certain Losses			
Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Value of property loss	Yes. Fill in the details. Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	15. With	in 1 year before you filed for bankru	uptcy or since you filed for bankruptcy, dic	I you lose anything because of theft	, fire, other disaster,
Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Value of property loss lost	Describe the property you lost and how the loss occurred Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		No			
how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	how the loss occurred Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.		Yes. Fill in the details.			
, .	. ,			Include the amount that insurance has paid	d. List pending	Value of property lost
	• •	Air	pods, Watch			\$600.00

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Part 7: List Certain Payments or Transfers

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you

Debtor 1	Deichler, Jonathan M.	Case number (if known)					
	sulted about seeking bankruptcy or prepariude any attorneys, bankruptcy petition preparers		s required in y	your bankruptcy.			
	No Yes. Fill in the details.						
Ad Em	rson Who Was Paid dress nail or website address rson Who Made the Payment, if Not You	Description and value of any proper transferred	rty	Date payment or transfer was made	Amount of payment		
67 Wi	w Office of David J. Harris -69 Public Sq Ste 700 ilkes Barre, PA 18701-2515 axine Deichler	Attorney's Fee - \$1,100.00 Filing Fee - \$335.00		10/24/2019	\$1,435.00		
Do	ollar Learning Foundation	Credit Counseling Certificate		11/08/19	\$15.00		
pro Dor ■	hin 1 year before you filed for bankruptcy, d mised to help you deal with your creditors o not include any payment or transfer that you liste No Yes. Fill in the details.	or to make payments to your creditors?			y to anyone who Amount of		
	dress	transferred	rty	Date payment or transfer was made	payment		
tran Incli	hin 2 years before you filed for bankruptcy, asferred in the ordinary course of your busing ude both outright transfers and transfers made as and transfers that you have already listed on the No Yes. Fill in the details.	ness or financial affairs? as security (such as the granting of a secur					
Ad	rson Who Received Transfer dress rson's relationship to you	Description and value of property transferred		any property or received or debts change	Date transfer was made		
	bert Deichler	Mossberg 20/22 Value =\$50.00	\$1.00		8/2018		
Fa	ther						
Та	tiana Garcia	Ford Five Hundred AWD 201,568 Miles	1100		10/2019		
ben ■	hin 10 years before you filed for bankruptcy eficiary? (These are often called asset-protection)		f-settled trus	st or similar device o	f which you are a		
□ Na	Yes. Fill in the details. me of trust	Description and value of the proper	ty transferre	ed	Date Transfer was		

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

For the purpose of Part 10, the following definitions apply:

- Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107

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Del	otor 1 Deichler, Jonathan M.		Case number (if known)	
24.	Has any governmental unit notified you that	you may be liable or potentially liable t	under or in violation of an environmer	ntal law?
	■ No □ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
25.	Have you notified any governmental unit of	any release of hazardous material?		
	■ No			
	☐ Yes. Fill in the details.			
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State and ZIP Code)	Environmental law, if you know it	Date of notice
26.	Have you been a party in any judicial or adm	ninistrative proceeding under any envir	onmental law? Include settlements an	d orders.
	■ No			
	☐ Yes. Fill in the details.			
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nature of the case	Status of the case
Par	t 11: Give Details About Your Business or 0	Connections to Any Business		
I al	Give Details About Your Business of V	Connections to Any Business		
27.	Within 4 years before you filed for bankrupto	cy, did you own a business or have any	of the following connections to any b	ousiness?
	A sole proprietor or self-employed in	n a trade, profession, or other activity, e	either full-time or part-time	
	☐ A member of a limited liability comp	any (LLC) or limited liability partnership	o (LLP)	
	☐ A partner in a partnership			
	D An officer, director, or managing exe	ecutive of a corporation		
	☐ An owner of at least 5% of the voting	·		
	_			
	—			
	Yes. Check all that apply above and fill			
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business	Employer Identification number Do not include Social Security	
	(Number, Street, City, State and 21r Code)	Name of accountant or bookkeeper	Dates business existed	
	Lake Wallenpaupack CBD		EIN:	
			From-To	
28.	Within 2 years before you filed for bankruptoinstitutions, creditors, or other parties. No Yes. Fill in the details below.	cy, did you give a financial statement to	anyone about your business? Includ	le all financial
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued		
Pai	t 12: Sign Below			

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Depto	Deichler, Jonathan M.	Case number (if known)	
bankru	intcy case can result in fines up to \$2	50,000, or imprisonment for up to 20 years, or both.	
	C. §§ 152, 1341, 1519, and 3571.	, o	
/s/ Jo	onathan M. Deichler		
	than M. Deichler ture of Debtor 1	Signature of Debtor 2	
Date	November 26, 2019	Date	
Did yo	u attach additional pages to Your Sta	rement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?	1
■ No			
☐ Yes			
Did yo	u pay or agree to pay someone who i	s not an attorney to help you fill out bankruptcy forms?	
■ No			
☐ Yes	. Name of Person Attach the Ba	nkruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).	

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

Debtor 1 Jonathan M. Deichler First Name Middle Name Last Name Middle Name Last Name Middle Name Last Name Middle Name Last Name Middle Name United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE United States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE DIVISION Case number (If known) Case nu	Fill in th	nis information to identi	ify your case:		
Debtor 2 Spouse #, ffing) First Name Middle Name Last Name Last Name Middle Name Case number Check if th amended f Check if th amended f Check if th amended f Official Form 108 Check if th amended f Official Form 108 Check if th amended f Official Form 108 Check if th Description of power and individual filling under chapter 7, you must fill out this form if: Creditor's have claims secured by your property, or You have leaded personal property and the lease has not expired. Our must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of cre whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and leasons the form. On the top of any additional write your name and case number (if known). Official Form 106D, find for any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), find formation below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim					
MiDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE MIDLE DISTRICT OF PENNSYLVANIA, WILKES-BARE MIDLE DISTRICT OF PENNSYLVANIA, WILKES-BARE MIDLE DISTRICT OF PENNSYLVANIA, WILKES-BARE MIDLE DISTRICT OF PENNSYLV				Last Name	
MIDDLE DISTRICT OF PENNSYLVANIA, WILKES-BARRE Difficial Form 108 Statement of Intention for Individuals Filing Under Chapter 7 You are an individual filing under chapter 7, you must fill out this form if: I creditors have claims secured by your property, or I you have leased personal property and the lease has not expired. Durn ust file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of crew whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors the form two married people are filling together in a joint case, both are equally responsible for supplying correct information. Both debtor and date the form. Description of property that is collateral What do you intend to do with the property (Official Form 106D), finformation below. Lettly the creditors and the property that is collateral What do you intend to do with the property (Official Form 106D), finformation below. Creditor's aname: Surrender the property and redeem it. Retain the property and redeem it. Retain the property and efficient into a Reaffirmation Agreement. Retain the property and efficient into a Reaffirmation Agreement. Creditor's aname: Surrender the property and efficient into a Reaffirmation Agreement. Retain the property and efficient into a Reaffirmation Agreement. Retain the property and efficient into a Reaffirmation Agreement. Retain the property and efficient into a Reaffirmation Agreement. Retain the property and efficient into a Reaffirmation Agreement. Retain the property and efficient into a Reaffirmation Agreement. Retain the property and efficient into a Reaffirmation Agreement. Retain the property and efficient into a Reaffirmation Agreement. Retain the property and efficient into a Reaffirmation Agreement. Retain the property and efficient into a Reaffirmation Agreement. Retain the property and efficient into a Reaffirmation Agreement. Retain the property and efficien		First Name	Middle Name	Last Name	
ase number Check if th amended f Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7 You are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or you have leased personal property and the lease has not expired. You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of cre whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and leasors the form are a complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional write your name and case number (if known). In 12 List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fi information below. Creditor's name: Description of property Retain the property and redeem it. Retain the property and redeem it. Retain the property and redeem it. Retain the property and enter into a Realfirmation Agreement. Retain the property and redeem it. Ret	podoc ii, iiiiig)	i not ramo			
Check if th amended for continuous filling under chapter 7. you must fill out this form if:	nited States Ba	ankruptcy Court for the:		T OF PENNSYLVANIA, WILKES-BARRE	
Difficial Form 108 Istatement of Intention for Individuals Filing Under Chapter 7 Interval of Intention for Individuals Filing Under Chapter 7 Interval of Intention for Individuals Filing Under Chapter 7 Interval of Intention for Individuals Filing Under Chapter 7 Interval of Intention for Individuals Filing Under Chapter 7 Interval of Intention for Individuals Filing Under Chapter 7 Interval of Intention for Individuals Filing Under Chapter 7 Interval of Intention for Individuals Filing Under Chapter 7 Interval of Intention for Individuals Filing Under Chapter 7 Interval of Intention for Individuals Filing Under Chapter 7 Interval of Intention for Individuals Filing Under Chapter 7 Interval of Intention of Inte	ase number				
vou are an individual filing under chapter 7, you must fill out this form if: creditors have claims secured by your property, or you have leased personal property and the lease has not expired. Nor must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of ore whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors the form Normaried people are filing together in a joint case, both are equally responsible for supplying correct information. Both debtor and date the form. Personal complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional write your name and case number (if known). Personal creditors who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), finformation below. Identify the creditor and the property that is collateral who you intend to do with the property that secures a debt? Creditor's Surrender the property, and enter into a Reaffirmation Agreement. Retain the property and enter into a Reaffirmation Agreement. Retain the property and enter into a Reaffirmation Agreement. Retain the property and redeem it. Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and redeem it. Retain the property and re	known)				Check if this is an amended filing
creditors have claims secured by your property, or you have leased personal property and the lease has not expired, our must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of crew whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors the form two married people are filling together in a joint case, both are equally responsible for supplying correct information. Both debtor and date the form. e as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional write your name and case number (if known). art is			on for Indiv	riduals Filing Under Chapte	er 7 12/15
you have leased personal property and the lease has not expired. During the this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of crewhichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors the form It is a complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional write your name and case number (if known). List Your Creditors Who Have Secured Claims For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), finformation below. Identify the creditor and the property that is collateral what do you intend to do with the property that secures a debt? Creditor's Surrender the property. Retain the property and redeem it. Retain the property and feedem it.	you are an ind	ividual filing under chap	pter 7, you must fill o	out this form if:	
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name: Retain the property and redeem it. Retain the property and enter into a Reaffirmation Yes			hat is collateral	• • • •	Did you claim the property as exempt on Schedule C
name: Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Retain the property and [explain]: Creditor's	Creditor's			☐ Surrender the property.	□ No
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name: Retain the property and redeem it. Retain the property and enter into a Reaffirmation Agreement. Property Retain the property and [explain]:	securing debt:				-
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—	•	f		Agreement.	
securing debt:				☐ Retain the property and [explain]:	
	securing debt:	:			-
Creditor's Surrender the property.	Creditor's			☐ Surrender the property.	□ No

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Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Debtor 1 Deichler, Jonathan M.	Case number (if known)	
name: Description of property securing debt:	 □ Retain the property and redeem it. □ Retain the property and enter into a <i>Reaffirmation Agreement</i>. □ Retain the property and [explain]: 	□ Yes
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed the information below. Do not list real estate leases. Unex may assume an unexpired personal property lease if the t	pired leases are leases that are still in effect; the lease	
Describe your unexpired personal property leases		Will the lease be assumed?
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Lessor's name: Description of leased Property:		□ No □ Yes
Part 3: Sign Below Under penalty of perjury, I declare that I have indicated my	v intention about any property of my estate that secu	res a debt and any personal
property that is subject to an unexpired lease.	,on about any property of my estate mat seeu	. oo a aoot ana any personai
X /s/ Jonathan M. Deichler Jonathan M. Deichler Signature of Debtor 1	X Signature of Debtor 2	
Date November 26, 2019	Date	

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

page 2

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Ally Financial PO Box 380902 Bloomington, MN 55438-0902

Community Bank, NA Recovery Department PO Box 509 Canton, NY 13617-0509

Convergent Outsourcing 800 SW 39th St Renton, WA 98057-4975

Direct TV PO Box 6550 Greenwood Village, CO 80155-6550

Home Credit PO Box 2394 Omaha, NE 68103-2394

Magistrate Shannon L. Muir 106 Shook Rd Ste 100 Hawley, PA 18428-7059

Patenaude & Felix, A.P.C. 501 Corporate Drive Southpointe Ctr Ste 205 Canonsburg, PA 15317 PayPal Credit Services P.O. Box 960080 Orlando, FL 32896-0080

Sprint Headquarters 6200 Sprint Pkwy Overland Park, KS 66251-6117

Synchrony Bank 45-49 Court St Canton, NY 13617-1179

T-Mobile Customer Relations PO Box 37380 Albuquerque, NM 87176-7380

The Dime Bank PO Box 790408 Saint Louis, MO 63179-0408

The Dime Bank 820 Church St Honesdale, PA 18431-1825

Vivint Home Security 62992 Collection Dr Chicago, IL 60601-0629

United States Bankruptcy Court Middle District of Pennsylvania, Wilkes-Barre Division

In re Deichler, Jonathan M. Case No.	
Debtor(s) Chapter 7	
DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTO	R
1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debt compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:	
For legal services, I have agreed to accept \$ 1,100	0.00
Prior to the filing of this statement I have received \$ 1,100	0.00
Balance Due \$	0.00
2. The source of the compensation paid to me was:	
☐ Debtor ☐ Other (specify): Maxine Deichler	
3. The source of compensation to be paid to me is:	
■ Debtor □ Other (specify):	
4. I have not agreed to share the above-disclosed compensation with any other person unless they are members and firm.	associates of my law
☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or assoc copy of the agreement, together with a list of the names of the people sharing in the compensation is attached.	ates of my law firm. A
5. In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, incl	ıding:
a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petb. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required;c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thed. [Other provisions as needed]	
By agreement with the debtor(s), the above-disclosed fee does not include the following service: For all services not set forth in subparagraphs a, b, and c above, including responding to c negotiating with creditors and attending and preparing for hearings and adversarial and co of any kind, (except the meeting of creditors) at a rate of \$350.00 per hour. The above fee is Debtor's advance of a filing fee of \$335.00.	ntested proceedings
CERTIFICATION	
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representathis bankruptcy proceeding.	tion of the debtor(s) in
November 26, 2019 /s/ David Harris	
Date David Harris	
Signature of Attorney Law Office of David J. Harris	
67-69 Public Sq Ste 700	
Wilkes Barre, PA 18701-2515	
Wilkes Barre, PA 18701-2515 (570) 823-9400 dh@lawofficeofdavidharris.com	